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UNITED STATES
HOUSE OF REPRESENTATIVES

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CONGRESSIONAL CASEWORK AUTHORIZATION FORM

PLEASE TYPE OR PRINT ONLY

Name: Mr. Mrs. Ms. _____

Address: _____

City: _____ Zip: _____

Telephone: (Home) _____ (Cell) _____ (Work) _____

E-Mail: _____

Alien Number: _____ Date of Birth: _____

Federal Agency Involved: ☐ USCIS ☐ Dept. of State ☐ Nat. Visa Center

Form type(s) – check all that apply:

☐ G-639 ☐ I-90 ☐ I-129 ☐ I-129F ☐ I-130 ☐ I-131 ☐ I-140 ☐ I-212 ☐ I-290B ☐ I-360

☐ I-485 ☐ I-526 ☐ I-539 ☐ I-589 ☐ I-590 ☐ I-600A ☐ I-600 ☐ I-601 ☐ I-612 ☐ I-690

☐ I-730 ☐ I-751 ☐ I-765 ☐ I-821 ☐ I-824 ☐ I-829 ☐ I-914 (Supplement A, B, or C)

☐ I-918 ☐ I-924 ☐ I-929 ☐ N-400 ☐ N-600 ☐ N-565 ☐ N-644 ☐ Other: _____

Petitioner's Country of Birth: _____

Beneficiary's Country of Birth: _____

I request the assistance of Congressman Ken Calvert in the following federal matter:
(Please provide a brief explanation of your problem and what specifically you are requesting from my office. Attach photocopies of documents relevant to this case. Use additional paper as necessary.)

I authorize Congressman Ken Calvert to act on my behalf to transmit and/or receive information pertinent to my request for assistance **THROUGHOUT THE DURATION OF MY CASE UNTIL FINAL COMPETITION.**

Signed: _____ Date: _____

Section below to be completed by the person who is the subject of the records:

I certify, under penalty of perjury, that 1) I provided or authorized all of the information in this privacy release and any document submitted with it; 2) I reviewed and understand all of the information contained in my privacy release and submitted with it; and 3) all of this information is complete, true, and correct.

I, (print your name) _____, authorize USCIS to release information contained in my USCIS records as relevant to checking my case status, and to the extent permitted by law, to Representative Calvert and the Member’s staff.

Signature (sign in ink): _____ Date: _____

***E-signatures are not valid per USCIS guidelines.**